



Metro St. Louis Storm Chaser's Association
57 Fawn Oaks Drive
O'Fallon, MO 63366

www.stlchasers.com

APPLICATION FOR MEMBERSHIP

- MEMBER (\$35.00) PER APPLICANT (NOT GROUP)
 ASSOCIATE MEMBER (\$25.00) PER APPLICANT (NOT GROUP)

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIPCODE: _____

EMAIL: _____

AFFILIATIONS: _____

PERSONAL/BUSINESS WEBSITE: _____

HAM RADIO CALL SIGN: _____ HAM RADIO LICENSE EXP: _____

HOW LONG HAVE YOU BEEN STORM SPOTTING/CHASING? _____

DATE OF LAST SPOTTER CLASS: _____ NWS SPOTTER ID #: _____

DO YOU HAVE ANY FORMAL TRAINING IN METEOROLOGY OR
FORECASTING? IF SO LIST BELOW:

**WILL YOU BE WILLING TO PARTICIPATE AT OUTSIDE ASSOCIATION
FUCNTIONS? _____**

**WILL YOU BE WILLING TO TEACH CLASSES IN FORECASTING TO OTHER
MEMBERS OR BE WILLING TO TEACH ABOUT SEVERE WEATHER TO THE
GENERAL PUBLIC? _____**

PAYMENT INFORMATION

**YOUR COMPLETED APPLICATION MUST BE ACCOMPANIED BY CASH, CHECK
OR MONEY ORDER PAYABLE TO THE “METRO ST. LOUIS STORM CHASER’S
ASSOCIATION”**

**VISA AND MASTERCARD ARE ALSO ACCEPTED. PLEASE DOUBLE CHECK
YOUR CREDIT CARD NUMBER AS INCORRECT INFORMATION WILL DELAY
THE PROCESSING OF YOUR APPLICATION.**

CHECK OR MONEY ORDER ENCLOSED FOR \$ _____

SIGNATURE: _____

**MY SIGNATURE ATTESTS THAT, TO THE BEST OF MY KNOWLEDGE, I MEET
THE REQUIREMENTS (IF APPLICABLE) FOR THE MEMBERSHIP GRADE I HAVE
REQUESTED AND THAT INFORMATION I HAVE FURNISHED ABOVE IS
COMPLETE AND ACCURATE. I FURTHER AGREE TO SUPPORT THE
OBJECTIVES OF THE ASSOCIATION AND DO HEREBY AGREE TO ABIDE BY
THE CONSTITUTION AND BYLAWS OF THE “METRO ST. LOUIS STORM
CHASER’S ASSOCIATION”**

DATE : _____ SIGNATURE: _____

OFFICE USE

**APPROVED: _____ DENIED: _____ DATE: _____
MEMBER ID #: _____**